



**Commonwealth of Massachusetts  
Health Care Quality and Cost Council  
Two Boylston Street, 5<sup>th</sup> floor  
Boston, MA 02116**

**DEVAL L. PATRICK**  
Governor

**TIMOTHY P. MURRAY**  
Lieutenant Governor

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**[www.mass.gov/healthcare](http://www.mass.gov/healthcare)**

**JUDYANN BIGBY, M.D.**  
Chair

**KATHARINE LONDON**  
Executive Director

Dear Health Care Claims Data Applicant:

Attached is the application for the Health Care Quality and Cost Council's Health Care Claims dataset. Please read the application carefully and complete the **entire** application form and provide the necessary attachments.

This document contains the Data Application, Confidentiality Agreement, and the Application Checklist. In addition, the Council highly recommends that applicants review regulations [129 CMR 2.00: Uniform Reporting System for Health Care Claims Data Sets](#) and [129 CMR 3.00: Disclosure of Health Care Claims Data](#) prior to making their data request. These regulations are available on the Council's website at [www.mass.gov/healthcare](http://www.mass.gov/healthcare).

As part of each data request, applicants must ensure that they will protect patient privacy and data security. Applicants must also demonstrate that the purpose of their request is in the public interest. Appropriate public purposes include, but are not limited to: health cost, quality and utilization analyses to formulate public policy; financial studies and analysis of hospital payment systems; utilization review studies; studies to develop indicators of quality of care and to identify areas for improvement; health care facility merger analyses; health planning and resource allocation studies; epidemiological studies, including the identification of morbidity and mortality patterns, and studies of prevalence and incidence of diseases; and research studies and investigation of other health care issues.

Completed applications will be evaluated by the Health Care Quality and Cost Council's Data Release Review Board (DRRB). The DRRB includes at least one member of the Council, at least one member of the Council's Advisory Committee, an attorney with expertise in health data privacy issues, a data security expert, a representative of a hospital licensed in Massachusetts, and any other individual whom both the Council and the Council's Executive Director deem necessary. The DRRB includes at least one person who has expertise using statistics, clinical data, demographic data, and payment data.

The DRRB considers applications every other month, and will make reasonable efforts to notify applicants of their decision within 45 days of each scheduled application submission date. Application submission dates for 2009 are detailed below. The DRRB decisions will be sent to applicants via both email and U.S. mail. Scheduled application submission dates are as follows. If a scheduled application submission date falls on a weekend or holiday, the application submission date will be the next business day.

February 25  
April 25  
June 25  
August 25  
October 25  
December 20

Please email the completed application and electronic attachments to the Health Care Quality and Cost Council at [hcqcc@state.ma.us](mailto:hcqcc@state.ma.us).

In addition, mail a hard copy data request on official company letterhead, an originally signed confidentiality agreement and any hard copy attachments which are not available electronically to:

**Health Care Quality and Cost Council  
2 Boylston Street, 5<sup>th</sup> Floor  
Boston, MA 02116-4704**

If you need more information regarding the application process, please contact the Council at [hcqcc@state.ma.us](mailto:hcqcc@state.ma.us) or call 617-988-3360.

Sincerely,

Katharine London  
Executive Director